COMMUTER HERD PERMIT NUMBER CO/KS2K12 SECTION I VC 1 CO PLEASE CIRCLE STATE BELOW

| CO to KS KS to CO P | LEASE CIRCLE STAT | E BELOW | |
|--|--|--|--|
| COLORADO INFO: | | | |
| Name/Ranch Name: | City | 7in. | |
| Physical Address of Cattle: Tele:Cell: | City | Zip E Moil: | Cty |
| USDA Premises ID# (if applicable) | 1 ax | E-Maii. | |
| USDA I Terrises ID# (II applicable) | | | |
| KANSAS INFO: | | | |
| Name/Ranch Name: | | | |
| Physical Address of Cattle: | City: | Zip: | Cty: |
| Tele: Cell: | Fax: | E-Mail: | |
| USDA Premises ID# (if applicable) | | | |
| No. of cattle to be pastured in <u>CO/KS</u> : Bulls Trich tested? Does this herd co-mingle with anyone e | | | |
| (con't) | | | |
| Date of movement into CO/KS : | Date of | return to CO/KS: | |
| The cows on this agreement are vaccinated). I agree to have all bulls tested for from female cattle for one week If my cattle become exposed to testing as may be required. HERD VETERINARIAN (Please Print Address: | or Trichomoniasis upon re Brucellosis or Tuberculos): | turn to Colorado, after is in either state, I will Tele: | having been separated agree to any necessary |
| | | | |
| PRODUCER SIGNATURE: | | Date: | |
| ************ | SECTION III ***FOR OFFICIAL USE OFFICIAL APPRO | ONLY********* | ****** |
| The above cattle owner is approved for requested in this agreement for pasture. | | cattle between Colorad | o and Kansas, as |
| CO State Animal Health | n Official | | |
| Date Date | 1 Official | Signature | · |
| Zuic | | 5151141410 | |
| Upon the recommendation of your State cattle as specified and under the terms a | | pprove your application | n for the movement of |
| KS State Animal Health | Official | | |
| Date RS State Annual Treatment | | Signature | |
| | | - 6 | |